

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000080371

Entity Name: MEA DESIGNS, LLC

FILED  
Apr 02, 2009  
Secretary of State

**Current Principal Place of Business:**

4644 WEST GANDY BLVD  
SUITE 4410  
TAMPA, FL 33611 US

**New Principal Place of Business:**

44 INDIAN BAYOU DR  
DESTIN, FL 32541 US

**Current Mailing Address:**

4644 WEST GANDY BLVD  
SUITE 4410  
TAMPA, FL 33611 US

**New Mailing Address:**

44 INDIAN BAYOU DR  
DESTIN, FL 32541 US

FEI Number: 20-1843258

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ALBRECHT, MIKKA E  
4644 WEST GANDY BLVD  
SUITE 4410  
TAMPA, FL 33611 US

**Name and Address of New Registered Agent:**

ALBRECHT, MIKKA E  
44 INDIAN BAYOU DR  
DESTIN, FL 32541 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

04/02/2009

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: ALBRECHT, MIKKA E  
Address: 4644 WEST GANDY BLVD SUITE 4410  
City-St-Zip: TAMPA, FL 33611 US

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: ALBRECHT, MIKKA E  
Address: 44 INDIAN BAYOU DR  
City-St-Zip: DESTIN, FL 32541 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MIKKA ALBRECHT

MGR

04/02/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date